

Authorized Signature

ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708 Website: www.nvsos.gov

ePayment Checklist (For Counter, Fax and Mail Requests)

Service Type: Counter Mail	Fax USE BLACK INK ONLY - DO NOT HIGHLIGHT
Order Processing Requested: (Expedite Processing Requires Additional Fees)	
Regular Processing 24-HOUR	Expedite 2-HOUR Expedite 1-HOUR Expedite
Payment by Electronic Check (account holder name and address required below)	
Account Type: Checking Routing Number:	echeck
Savings <u>Account Number:</u>	
	Amount of Electronic Check: USD \$
Payment by Card (card holder name and billing address required below)	
	erCard Discover American Express
Customer Credit Card Number:	V CODE*
* 3-digit number found on the far right of the backside of VISA, MasterCard and Discover cards 4-digit number found on the front right side of American Express card.	
NOTICE: For security and verification purposes, all credit card payments must include the 3 or 4-digit CVV2 code (VCode) number located on the credit card. Failure to include this code will result in the rejection of your filing or service request.	
Credit Card Expiration Date: Month	Year
	Amount to Charge Card: USD \$
Order Information (required)	
Entity Name/Order Reference:	
Account/Card Holder Information:	
Name as it Appears on the Account	
Billing Address	
City, State, Zip	
Telephone	
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Payment Authorization I authorize the Secretary of State to bill an amount not to exceed the following to be charged to the above listed account(s):	
X	Not to Exceed Amount: USD \$